THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARADEVI SIDDHARTHA): (a) to (d) Information is being collected and will be placed on the Table of the House.

Jammu and Kashmir Medical Candidates in All India Competitions

1916. SHRI SHABBIR AHMAD SALARIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that MCI does not at present allow candidates from Jammu and Kashmir to compete for PHD/MD/MS examinations in All India Competitions held by it;

(b) whether it is also a fact that the Governor of the State has already forwarded a report for allowing Jammu and Kashmir candidates to compete in the same; and

(c) whether Government propose to take an early decision for allowing Jammu and Kashmir candidates to compete with others and to earmark seats for them?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARADEVI SIDDHARTHA): (a) The Medical Council of India is not conducting any All India Competition for entrance to MD/MS Courses to the Medical Colleges in India. All India PG Entrance Examination are conducted by the All India Institute of Medical Sciences, New Delhi. The State of Jammu and Kashmir and Andhra Pradesh had themselves opted out of this scheme and hence not included in it.

(b) and (c) The Government of Jammu and Kashmir has now expressed its wilingness to participate in the All India Scheme. They have been requested to furnish the information regarding the names and number of medical colleges and the number of seats allocated to All India Under-graduate and Post-graduate quota. The information is awaited from the State Government. Appropriate action can be taen only after the receipt of the requisite information fromthe Government of Jammu and Kashmir

Control of Population Growth

1917. SHRI MENTAY PADMANABHAM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the lack of commitment on the part of bureaucracy has come in the way of checking population growth;

(b) what is Government's reaction to the alarming tendencies and rapid growth in population as revealed by the 1991 census;

(c) what are the details of the proposed VAFAH apex body;

(d) whether the body is likely to be dominated by Government; and

(e) what are the safeguards being considered for allowing VAFAH to try new ideas to control population growth?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARADEVI SIDDHARTHA): (a) No, Sir.

(b) Faced with the grim proppects of the population explosion it is considered necessary to devise innovative strategies for imparting a new thrust and dynamism to the population control efforts in the country. While the population control programme has to essentially evolve as a multi-sectoral programme, comprising many aspects which go beyond the activities under the family welfare sector an exercise has been initiated during the last 4—5 months to evolve a result-oriented Action Plan in close consultation with the State Governments/UTs Administration. Accordingly, based on the consensus reached in a meeting of Secretaries Incharge of Family Welfare of States/UTs held at New Delhi on the 29—30th August, 1991, a draft Action Plan has been formulated.

This has been sent to the State Governments/UTs Administration with the request that they may consider this Action Plan further and suggest improvements, if